



# APPLICATION

## Storefront Improvement Pilot Program

**BUSINESS/BUILDING NAME:** \_\_\_\_\_

### Purpose

Storefront appearance is a critical aspect of the overall aesthetic appeal and unique character of a commercial district. Because it creates a first impression, it is also key to individual business success. The purpose of the City of Beaverton's Storefront Improvement Pilot Program is to encourage businesses and property owners within eligible program areas to improve their storefronts, making these areas more attractive to shoppers and increasing the economic vitality and attractiveness to new investment.

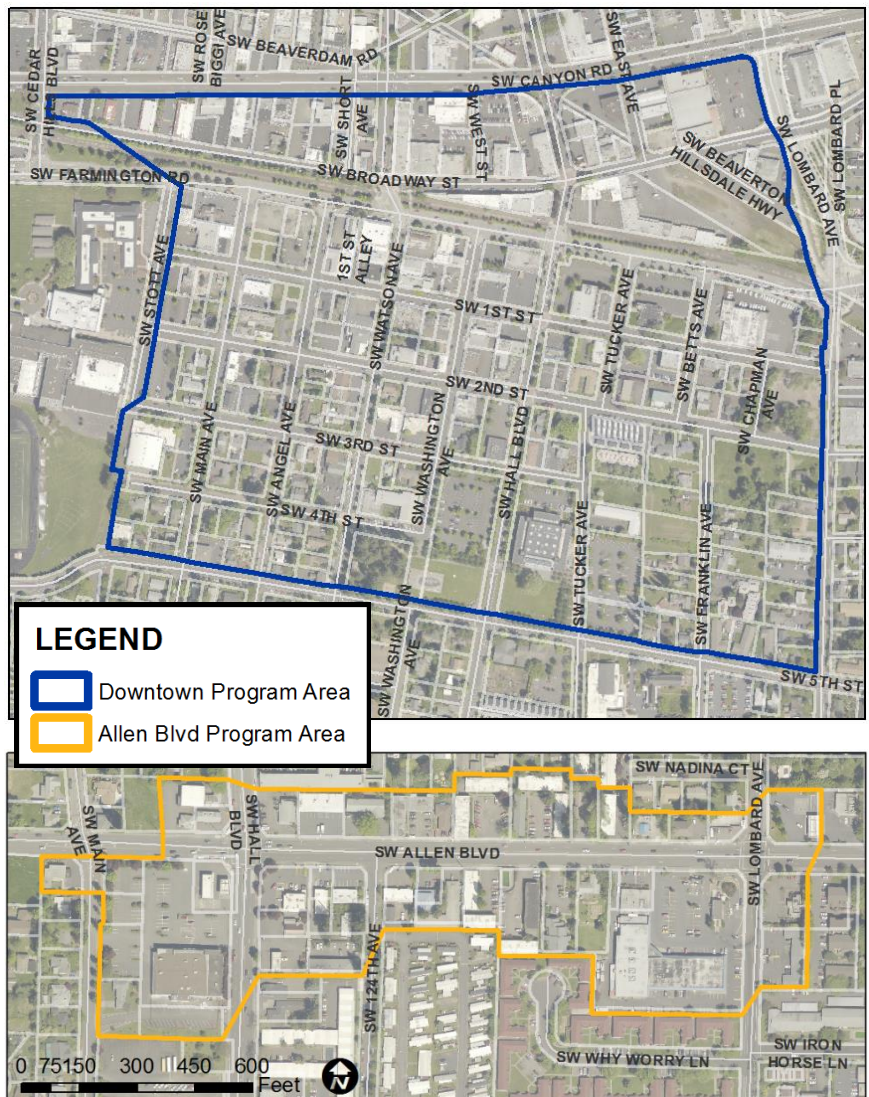
### Program Areas

To be eligible for the Storefront Improvement Pilot Program, the business and/or property must be located within either the Downtown or Allen Blvd Program Area.

### Types of Grants

Two types of grant are being offered:

- DESIGN SERVICES GRANT  
A city-contracted architect is available to help with concept development or full scope creation, resulting in documents needed to obtain bids.
- IMPLEMENTATION GRANT  
Grants to cover a portion of actual improvements to the exterior of a building.



## Eligibility

Buildings/businesses are eligible if they meet the following criteria:

- The building is used primarily for commercial use.
- The business faces a street.
- The business is open to the public. Businesses with age restrictions, such as some bars, are eligible. Businesses that only provide services to members are not.
- The business is located within one of the Program Areas. (see map on page 1)

Exclusions include:

- National chains, defined as franchises/for profit corporations that are not headquartered in the State of Oregon or Clark County Washington; except in the case where the franchisee or brand has a Beaverton-based owner and the brand has no more than one location within the Beaverton city limits at completion this grant.

## Grant Application Process

1. Contact Program Manager to determine if your project is eligible:

Megan Braunsten, Development Project Coordinator  
503.526.2419 • [mbraunsten@BeavertonOregon.gov](mailto:mbraunsten@BeavertonOregon.gov)

2. Identify scope of work and obtain bids as needed.
3. Complete and return this application before the application deadline.

**Spring 2016 Deadline: March 11, 2016**

**Fall 2016 Deadline: September 9, 2016**

4. For Design Services Grants – begin working with city-contracted architect.
5. For Improvement Grants:
  - a. Submit applications for all needed city permits.
  - b. Construction can begin once all permits have been approved.
  - c. Once the work is complete, submit all paid receipts to the city for reimbursement.

## Application

### APPLICANT INFORMATION:

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant Mailing Address: \_\_\_\_\_

Are you the: Business Owner ☐ Property Owner ☐

(If the Applicant is not the owner of the property, the Owner Authorization Form on page 6 must be filled out and submitted with this application.)

**BUSINESS INFORMATION:**

Name of Business: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Tax ID Number: \_\_\_\_\_ Beaverton Business License Number: \_\_\_\_\_

Age of Business: \_\_\_\_\_ How do customers reach you: Transit ☐ Bike ☐ Car ☐ Walk ☐

What are your store hours: M \_\_\_\_\_ T \_\_\_\_\_ W \_\_\_\_\_ Th \_\_\_\_\_ F \_\_\_\_\_ Sat \_\_\_\_\_ Sun \_\_\_\_\_

How is your business organized (corporation, sole proprietorship, LLC, etc.): \_\_\_\_\_

In which State are incorporation and/or organization documents filed? Oregon ☐ Other: \_\_\_\_\_

Is this business certified as a:

- ☐ Minority Business Enterprise (MBE) *(Note: Oregon certified MBE/WBE/ESB businesses will receive additional evaluation points. For more information about certification visit: <http://www.oregon4biz.com/How-We-Can-Help/OMWESB/>)*
- ☐ Women Business Enterprise (WBE)
- ☐ Emerging Small Business (ESB)

Is this business a part of a national chain (see definition on page 2)? Yes ☐ No ☐Is this business a for-profit corporation with locations outside of Beaverton? Yes ☐ No ☐Is this business church-owned, fraternal, or housed in a government building? Yes ☐ No ☐Is this business in a building that is primarily for residential use? Yes ☐ No ☐Does this business exclude minors? Yes ☐ No ☐

Number of employees at this time: \_\_\_\_\_ Number expected in two years: \_\_\_\_\_

Leasable square feet at this time: \_\_\_\_\_ Square feet expected in two years: \_\_\_\_\_

**PROPERTY INFORMATION:**

(If Applicant is the property owner, please answer. Otherwise leave blank as questions are repeated on the Owner Authorization Form.)

Building Owner Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Tax Account Number: \_\_\_\_\_ Year Building Built: \_\_\_\_\_

Has this property received other public funding or grants in the past five years? Yes ☐ No ☐

If yes, please describe: \_\_\_\_\_

**PROJECT INFORMATION:**Which Program Area is this business/building inside of? Downtown ☐ Allen Blvd ☐Which type of grant are you applying for? Design Services Grant ☐ Improvement Grant ☐

Briefly describe proposed improvements and work to be completed: \_\_\_\_\_

\_\_\_\_\_

How will these proposed improvements benefit your business/building: \_\_\_\_\_

\_\_\_\_\_

IMPROVEMENT GRANTS ONLY:

Which building or land use permits (if known) will be needed for this project: \_\_\_\_\_

\_\_\_\_\_

PROJECT BUDGET		
Activity	Contractor	Estimate
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
TOTAL BUDGET:		\$

Source(s) of matching funds:

- |   |   |
|---|---|
| <input type="checkbox"/> Bank/Credit Union Loan | <input type="checkbox"/> Friend/Family Loan |
| <input type="checkbox"/> Business Savings       | <input type="checkbox"/> Personal Savings   |
| <input type="checkbox"/> Gift                   | <input type="checkbox"/> Grant: _____       |

**INCLUDE COPIES OF THE FOLLOWING FOR THIS APPLICATION TO BE COMPLETE:**

- ☐ **Owner Authorization Form (if Applicant is not the property owner)**
- ☐ **Before photos of the exterior of the property in question**
- ☐ **Any architectural drawings such as plans, elevations or sketches related to this project**
- ☐ **Bid(s)** – Please note: Only one bid is required for this application; however, for all projects over \$5,000, three bids will be required prior to the Commitment Letter being issued and work beginning.
- ☐ **Applicant's W-9**

## STATEMENT OF UNDERSTANDING & CERTIFICATION BY APPLICANT

I, \_\_\_\_\_, (The Applicant) certify that I am authorized to sign on behalf of the Applicant entity. I understand that the City of Beaverton must approve the proposed exterior storefront improvements. Certain changes or modifications may be required by the City of Beaverton prior to final approval.

Commitment of funds will not be processed before the City of Beaverton has received the necessary bids for the approved work. Any work started before a commitment letter is sent will not be eligible for reimbursement. Furthermore, any work that is more than the approved scope of work must be *pre-approved* by the City in order for the work to be eligible for reimbursement.

The Applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a Storefront Improvement Program grant and is true and complete to the best of the Applicant's knowledge. As required, the Applicant agrees to assist the City of Beaverton in verifying any of the information contained in this application from any available source.

If the Applicant is not the owner of the property, or if the Applicant is not the sole owner of the property, the Owner Authorization Form must be filled out and attached. The Applicant is aware that a copy of the W-9 for the business that is applying for the Storefront Improvement Program grant must be attached to this application for it to be complete.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

### PLEASE RETURN THIS APPLICATION AND SUPPLEMENTAL DOCUMENTS TO:

Megan Braunsten, Development Project Coordinator  
Community Development Department  
City of Beaverton  
PO Box 4755  
Beaverton, OR 97076

(503) 526-2419 · [mbraunsten@BeavertonOregon.gov](mailto:mbraunsten@BeavertonOregon.gov)

## Storefront Improvement Pilot Program Owner Authorization Form

(Only required if the Applicant was not the property owner.)

### PROPERTY INFORMATION:

Building Owner Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property Tax Account Number: \_\_\_\_\_ Year Building Built: \_\_\_\_\_

Has this property received other public funding or grants in the past five years? Yes ☐ No ☐

If yes, please describe: \_\_\_\_\_

I, \_\_\_\_\_, am the owner of the building that is located at  
\_\_\_\_\_ in Beaverton, OR. I hereby give authorization for  
\_\_\_\_\_, the business that is housed in my building to use  
the City of Beaverton's Storefront Improvement Program grant to alter the look of my building  
through exterior rehabilitation work.

I also certify that this building has not received the City of Beaverton Storefront Improvement  
Program grant funds within the last five (5) years. If it has, then the amount of the grant was  
\$\_\_\_\_\_ and was received in the year \_\_\_\_\_.

\_\_\_\_\_  
**Printed Name of Owner**

\_\_\_\_\_  
**Signature of Owner**

\_\_\_\_\_  
**Date**